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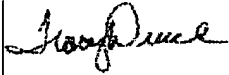
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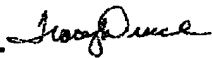
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/065,048	
	Filing Date	09/13/2002	
	First Named Inventor	STRAAT	
	Group Art Unit	3721	
	Examiner Name	STRAAT	
Total Number of Pages in This Submission		Attorney Docket Number	03485.0003.NPUS00

ENCLOSURES <i>(check all that apply)</i>				
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Proposed Amended Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Declaration/Power of Attorney - Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>		
<table border="1" style="width: 100%;"> <tr> <td style="width: 15%; text-align: center;">Remarks</td> <td></td> </tr> </table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	NOVAK DRUCE, LLP Tracy W. Druce
	
Date	05/03/2004

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to Examiner Louis B. TRAN, Art Unit 3721, United States Patent and Trademark Office, Alexandria, VA at fax no. <u>703.872.9306</u> on <u>3 May 2004</u> .			
Typed or printed name	Tracy W. Druce		
Signature		Date	3 May 2004